

LZ0 000051870

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

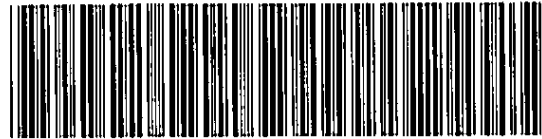
(Business Entity Name)

(Document Number)

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JUN 29 2020
S. YOUNG

FILED
2020 JUN 11 AM 6:48

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: American Dreamz LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Dyllan Smith
Name of Person

American Dreamz LLC
Firm/Company

1317 Edgewater Dr #1976
Address

Orlando / FL 32806
City/State and Zip Code

americandreamz1@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dyllan Smith at (407) 452-2296
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

American Dreamz LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
2020 JUN 11 AM 6:18
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF ORANGE
FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 02/20/2020 and assigned Florida document number L20000051870.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1725 Jessamine Ave
Orlando, FL 32806

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P.O. Box 568829
Orlando, FL 32856

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Alicia Smith

New Registered Office Address:

1725 Jessamine Ave

Enter Florida street address

Orlando, Florida 32806
City Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Alicia Smith

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Ambr	Dyllan Smith	1725 Jessamine Ave	<input type="checkbox"/> Add
		Orlando, FL 32806	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
Ambr			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Jason Smith	1725 Jessamine Ave	<input type="checkbox"/> Add
		Orlando, FL 32806	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

Dated 5/23/2020

Dyllan Smith
Signature of a member or authorized representative of a member

Dyllan Smith
Typed or printed name of signee